DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

DEVICE AND METHOD FOR VISION ENHANCEMENT AND FOR DETERMINING THE WEATHER SITUATION

the specification of which (check one)

the specification of which (check one)						
is attached hereto						
☐ was filed on as Internation	al App	lication Serial	No.	and was amended	on (if ap	plicable).
I hereby authorize and request our att York, New York 10018 to insert here in parenthe filed) the filing dat	eses (a	pplication num	ber	ppel, LLC of 485 Se		enue, New
I hereby state that I have reviewed and understa amended by any amendment referred to above.	and the	* *	-			e claims, as
I acknowledge the duty to disclose all information defined in Title 37, Code of Federal Regulations			e to be materia	I to the patentability	of this ap	plication as
I hereby claim foreign priority benefits under application(s) for patent or inventor's certificate application for patent or inventor's certificate have PRIOR APPLICATION(S)	listed	below and ha	ve also identif	ied below any foreig	n and/or	provisional
DE 103 03 047.6	Germ	any	24 January 20	003	Priority c	
Number	Count	ry	Day/Month/Year	Filed	Yes	No
Number	Count	ry	Day/Month/Year	Filed	Priority cl	laimed No
I hereby claim the benefit under Title 35, Unite insofar as the subject matter of each of the clair the manner provided by the first paragraph of material information as defined in Title 37, Code the prior application and the national or PCT interests.	ns of the f Title e of Fe	nis application 35, United St deral Regulati	is not disclose ates Code, §1 ons, §1.56(a)	d in the prior United 12, I acknowledge to which occurred between	States ap	pplication in to disclose
Application Serial Number		Day/Month/Yea	r Filed	Status		
Application Serial Number		Day/Month/Year Filed		Status		
And I hereby appoint Clifford M. Davidson, Reg. 36,561, William C. Gehris, Reg. No. 38,156, Mo						

And I hereby appoint Clifford M. Davidson, Reg. No. 32,728, Leslye B. Davidson, Reg. No. 38,854, Cary S. Kappel, Reg. No. 36,561, William C. Gehris, Reg. No. 38,156, Morey B. Wildes, Reg. No. 36,968, Robert J. Paradiso, Reg. No. 41,240, Erik R. Swanson, Reg. No. 40,833, Thomas P. Canty, Reg. No. 44,586, and all other registered attorneys and agents at Davidson, Davidson & Kappel, LLC, U.S. Patent and Trademark Office Customer Number 23280, my attorneys, with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith; correspondence address: DAVIDSON, DAVIDSON & KAPPEL, LLC, 485 Seventh Avenue, 14th Floor, New York, New York 10018; Telephone: (212) 736-1940; Fax: (212) 736-2427.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first Inventor	Michael HOLZ
Inventor's signature	
Date	
Residence	Senden, Germany
Post Office Address	Sachsenstrasse 17 a, D-89250 Senden, Germany
Citizenship	Germany

Full name of additional Inventor	Joerg MOISEL
Inventor's signature	
Date	
Residence	Neu-Ulm, Germany
Post Office Address	Krummenweg 4 D-89233 Neu-Ulm, Germany
Citizenship	Germany

Docket No.: 510.1094

DECLARATION AND POWER OF ATTORNEY

Docket No.: 510.1094

Full name of additional Inventor	Michael WEIDEL	Full name of additional Inventor
Inventor's signature		Inventor's signature
Date		Date
Residence	Senden, Germany	Residence
Post Office Address	Hudlerstrasse 25, D-89250 Senden, Germany	Post Office Address
Citizenship	Germany	Citizenship
Full name of additional Inventor		Full name of additional Inventor
Inventor's signature		Inventor's signature
Date		Date
Residence		Residence
Post Office Address		Post Office Address
Citizenship		Citizenship
Full name of additional Inventor		Full name of additional Inventor
Inventor's signature		Inventor's signature
Date		Date
Residence		Residence
Post Office Address		Post Office Address
Citizenship		Citizenship
Full name of additional Inventor		Full name of additional Inventor
Inventor's signature		Inventor's signature
Date		Date
Residence		Residence
Post Office Address		Post Office Address
Citizenship		Citizenship